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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE 1101 VERMONT AVENUE, NW ADDRESS (number and street) 12TH FLOOR Check if different than previously WASHINGTON DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00000422 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 02 0 1 2006 02 28 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **KEVIN WALKER** Type or Print Name of Treasurer Electronically Filed by KEVIN WALKER 03 20 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

V	Write or Type Committee Name AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE				
F	Repor	t Covering the Period: From:	0 1 2 0 0 6 To	D: 02 28 2006	
			COLUMN A This Period	COLUMN B Calendar Year-to-Date	
6.	(a)	Cash on Hand January 1  Y2006		2046116.92	
	(b)	Cash on Hand at Begining of Reporting Period	2286104.61		
	(c)	Total Receipts (from Line 19)	252017.84	509988.29	
	(d)	Subtotal (add lines 6(b) and			
		6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2538122.45	2556105.21	
7.	Tota	al Disbursements (from Line 31)	146521.67	164504.43	
8.	Cas	sh on Hand at Close of			
		oorting Period otract Line 7 from Line 6(d))	2391600.78	2391600.78	

10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) .....

Schedule C and/or Schedule D) .....

9. Debts and Obligations owed the committee (Itemize all on

0.00

0.00

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

### AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

0 1 м м 0 2 0 2 M 2006 28 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 176285.00 408752.00 (i) Itemized (use Schedule A) ...... 87468.70 68422.97 (ii) Unitemized ..... (iii) TOTAL (add 244707.97 496220.70 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 244707.97 496220.70 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 7309.87 13767.59 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 252017.84 509988.29 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 252017.84 509988.29 (subtract Line 18(c) from Line 19) .....

from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 921.67 1577.37 Expenditures..... (c) Total Operating Expenditures 921.67 1577.37 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 4977.06 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 145600.00 157950.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) ......... 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 146521.67 164504.43 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

146521.67

164504.43

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	244707.97	496220.70
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
85.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	244707.97	496220.70
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	921.67	1577.37
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	921.67	1577.37

PAGE 6/49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ANGELA KAY ANDERSON, MD Date of Receipt Mailing Address 2 MEMORIAL DRIVE 02 02 2006 City State Zip Code Transaction ID: SA11A1.18080 **DECATUR** IL 62526 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. NANCY J ANTONACCI, MD Date of Receipt Mailing Address 536 LAKE VALLEY DRIVE 02 02 2006 City Zip Code State Transaction ID: SA11A1.18060 **LEXINGTON** KY 40509 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DAVID ORRIN BARBE, MD Date of Receipt Mailing Address 120 W 16TH STREET 02 02 2006 Citv State Zip Code Transaction ID: SA11A1.18058 MTN GROVE MO Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ST JOHNS CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 7/49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MEL BRITTON, MD Date of Receipt Mailing Address 167 TOYON ROAD 02 14 2006 City State Zip Code Transaction ID: SA11A1.18100 **ATHERTON** CA 94027 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PALO ALTO MEDICAL FOUNDAT-Occupation **PHYSICIAN** ION Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. BROOKE BUCKLEY, MD Date of Receipt Mailing Address 18101 LORAIN AVENUE 02 15 2006 City Zip Code State Transaction ID: SA11A1.18138 **CLEVELAND** OH 44111 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer FAIRVIEW HOSPITAL Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. HOWARD CHODASH, MD Date of Receipt Mailing Address 3804 INDIAN LANDS LANE 02 02 2006 Citv State Zip Code Transaction ID: SA11A1.18076 **SPRINGFIELD** Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SIU SCHOOL OF MEDICINE Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional) .....

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 49 (check only one)  X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nate	ements may me and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PO	OLITICAL	ACTION COMMITTEE	
۹.	Full Name (Last, First, Middle Initial) MICHAEL ALAN CREWS, MD			Date of Receipt
	Mailing Address 44111 25 WAY NE			02 24 2006
	City ALBUQUERQUE	State NM	Zip Code 87109	Transaction ID: SA11A1.18116  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07109	250.00
	SELF-EMPL'OYED	Occupation PHYSICIA	AN	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) CAROLYN BEACH DAUL, MD Mailing Address 1416 MARENGO STREE	T		Date of Receipt  0 2 0 2 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.18063
	NEW ORLEANS  FEC ID number of contributing federal political committee.	C	70115	Amount of Each Receipt this Period  500.00
	SELE EMBLOYED	Occupation PHYSICIA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
).	Full Name (Last, First, Middle Initial) RONALD M DAVIS, MD			Date of Receipt
Mailing Address 2495 BARNSBURY ROAD				02 / 28 / 2006
	City EAST LANSING	State MI	Zip Code 48823	Transaction ID: SA11A1.18144  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
		Occupation PHYSICIA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
			<u>·</u>	

PAGE 9/49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) RONALD KING DOWNS, MD Date of Receipt Mailing Address 500 ARCADE AVENUE 02 02 2006 City Zip Code State Transaction ID: SA11A1.18078 **ELKHART** IN 46514 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer THE CENTRE Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. NC MEDICAL POL EDUC & ACTION CMMT Date of Receipt Mailing Address PO BOX 25834 02 06 2006 City Zip Code State Transaction ID: SA11A1.18072 **RALEIGH** NC 27611 Amount of Each Receipt this Period FEC ID number of contributing C 1300.00 federal political committee. Name of Employer Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 4550.00 Other (specify) Full Name (Last, First, Middle Initial) C. NC MEDICAL POL EDUC & ACTION CMMT Date of Receipt Mailing Address PO BOX 25834 02 17 2006 City State Zip Code Transaction ID: SA11A1.18108 **RALEIGH** NC 27611 Amount of Each Receipt this Period FEC ID number of contributing 1750.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 6300.00 Other (specify) 3550.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 10 / 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) KENTUCKY EDUC MEDICAL PAC Date of Receipt Mailing Address 4965 US HIGHWAY 42 02 06 2006 City Zip Code State Transaction ID: SA11A1.18070 LOUISVILLE KY 40222 Amount of Each Receipt this Period FEC ID number of contributing 2050.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 5150.00 Other (specify) Full Name (Last, First, Middle Initial) B. SHELDON G GROSS, MD Date of Receipt Mailing Address 3139 IRON STONE LAND 02 14 2006 City State Zip Code Transaction ID: SA11A1.18092 **SAN ANTONIO** TX 78230 Amount of Each Receipt this Period FEC ID number of contributing C 450.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) C. CURTIS L HEDBERG, MD Date of Receipt Mailing Address 5417 PINNACLE POINT DRIVE 02 02 2006 Citv State Zip Code Transaction ID: SA11A1.18082 **ROGERS** AR 72758 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 11/49 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JEAN WARE HILL Date of Receipt Mailing Address 1376 COUNTRYWOOD COVE 02 02 2006 City Zip Code Transaction ID: SA11A1.18061 State **TUPELO** MS 38801 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer N/A Occupation **HOUSEWIFE** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL DAVID HUNTER, MD Date of Receipt Mailing Address 3100 GARDEN VISTA 02 02 2006 City State Zip Code Transaction ID: SA11A1.18054 **EDMOND** OK 76034 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. THOMAS R HURLEY, MD Date of Receipt Mailing Address 1116 PINE RIDGE CT 02 14 2006 Zip Code Citv State Transaction ID: SA11A1.18102 **NAPERVILLE** Ш 60540 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SW SUBURBAN NEUROLOGICAL Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 49 (check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	
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				13 14 15 16 17
Ar or	ly information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may ime and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	AMERICAN MEDICAL ASSOCIATION P	OLITICAL	ACTION COMMITTEE	
A.	Full Name (Last, First, Middle Initial) PAT HYER			Date of Receipt
	Mailing Address 6401 CAHOBA DRIVE			02 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.18132
	FORT WORTH	TX	76135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer N/A	Occupation SPOUSE		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify)		500.00	
— В.	Full Name (Last, First, Middle Initial) REX HYER, MD			Date of Receipt
	Mailing Address 6401 CAHOBA DRIVE			M M / D D / Y Y Y Y
				02 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.18130
	FORT WORTH	TX	76135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer NORTH STAR ANESTHESIA	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify)		500.00	
	Full Name (Last, First, Middle Initial)			
C.	BARNEY R MAYNARD, MD			Date of Receipt
	Mailing Address 1225 SPRING CREEK D	RIVE		02 02 2006
	City	State	Zip Code	Transaction ID: SA11A1.18056
	EVANSVILLE	IN	47710	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.00
	Name of Employer UROLOGICAL ASSOCIATES	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		600.00	
_				
	<u> </u>			
S	UBTOTAL of Receipts This Page (optional)			1500.00
$\Box$				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 49 (check only one)  X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nan	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PC	DLITICAL	ACTION COMMITTEE	
A. 3.	N/A I	State AL  C  Occupation N/A  Aggregate	Zip Code 36102  Year-to-Date ▼ 3360.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City  LITTLE ROCK  FEC ID number of contributing federal political committee.  Name of Employer N/A	State AR C Occupation N/A Aggregate	Zip Code 72215  P Year-to-Date ▼ 400.00	Transaction ID: SA11A1.18117  Amount of Each Receipt this Period  400.00
C.	NA I	State CA C C Occupation NA Aggregate	Zip Code 94105  Year-to-Date ▼ 20550.00	Date of Receipt  M M M / D D M 2 8 2 0 0 6  Transaction ID: SA11A1.18122  Amount of Each Receipt this Period  10700.00
SI	JBTOTAL of Receipts This Page (optional)		·····	11550.00
Т	OTAL This Period (last page this line number only	·)	<b>)</b>	

SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 14 / 49
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
17	AMERICAN MEDICAL ASSOCIATION F	POLITICAL	. ACTION COMMITTEE	
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	COLORADO MEDICAL PAC			Date of Receipt
	Mailing Address PO BOX 17550			M M / D D / Y Y Y
				02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.18106
	DENVER	CO	80217	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer	Occupation	า	
	N/A	N/A		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		700.00	1
	Other (specify) ▼	0 0		
_	Full Name (Last, First, Middle Initial)			
В.	CONNECTICUT MEDICAL PAC			Date of Receipt
	Mailing Address 160 ST RONAN STREE	T		M M / D D / Y Y Y
				02 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.18067
	NEW HAVEN	CT	06511	Amount of Each Receipt this Period
	FEC ID number of contributing	С		3100.00
	federal political committee.			
	Name of Employer	Occupation	า	
	N/A	N/A		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		5560.00	
	Other (specify)			J
	Full Name (Last, First, Middle Initial)			
C.	DELAWARE MEDICAL PAC			Date of Receipt
	Mailing Address 1925 LOVERING AVEN	UE		M M / D D / Y Y Y Y
	0"		7' 0 1	02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.18105
	WILMINGTON	DE	19806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		700.00
	'			
	Name of Employer N/A	Occupation	า	
		N/A		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		700.00	
	Curior (apoonly)	0 0	0 0 0 0 0 0 0	1
s	JBTOTAL of Receipts This Page (optional)			4050.00
$\vdash$	ago (optional)			

PAGE 15/49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) FLORIDA MEDICAL PAC Date of Receipt Mailing Address PO BOX 10269 02 2006 13 City State Zip Code Transaction ID: SA11A1.18089 **TALLAHASSEE** 32302 FI Amount of Each Receipt this Period FEC ID number of contributing 3360.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 7180.00 Other (specify) Full Name (Last, First, Middle Initial) B. HAWAII MEDICAL PAC Date of Receipt Mailing Address 1360 S BERETANIA STREET 02 06 2006 City Zip Code State Transaction ID: SA11A1.18066 **HONOLULU** HI 96814 Amount of Each Receipt this Period FEC ID number of contributing C 890.00 federal political committee. Name of Employer Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 890.00 Other (specify) Full Name (Last, First, Middle Initial) C. HAWAII MEDICAL PAC Date of Receipt Mailing Address 1360 S BERETANIA STREET 02 28 2006 Citv State Zip Code Transaction ID: SA11A1.18121 HONOLULU HI 96814 Amount of Each Receipt this Period FEC ID number of contributing 540.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 1430.00 Other (specify) 4790.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/49
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any or fo	information copied from such Reports and State or commercial purposes, other than using the nar	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PO	OLITICAL	ACTION COMMITTEE	
•	Full Name (Last, First, Middle Initial) LLINOIS MEDICAL PAC Mailing Address 20 N MICHIGAN AVENUE  City CHICAGO FEC ID number of contributing ederal political committee.  Name of Employer N/A	State IL C	Zip Code 60602	Date of Receipt    M M
_	Receipt For: Primary General Other (specify) ▼	n/a Aggregate	Year-to-Date ▼ 5155.00	
<b>3.</b> _	Full Name (Last, First, Middle Initial) NDIANA MEDICAL PAC Mailing Address 322 CANAL WALK			Date of Receipt    Date of Receipt
	Dity	State	Zip Code	Transaction ID: SA11A1.18109
F	NDIANAPOLIS FEC ID number of contributing ederal political committee.	C	46202	Amount of Each Receipt this Period  13510.00
_	Λ/Δ ' '	Occupation N/A Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		39650.00	
C. <u>I</u>	Full Name (Last, First, Middle Initial) OWA MEDICAL PAC Mailing Address 1001 GRAND AVENUE			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
(	City	State	Zip Code	Transaction ID: SA11A1.18065
_	W. DES MOINES	IA	50265	Amount of Each Receipt this Period
f	FEC ID number of contributing ederal political committee.	C		1810.00
1	\/\^ ' '	Occupation N/A	1	
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5840.00	
SU	BTOTAL of Receipts This Page (optional)		·····	15540.00
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SC	CHEDULE A (FEC Form 3X)		Llog concrete cobodulo(a)	FOR LINE NUMBER: PAGE 17 / 49
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ime and ado	not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\rangle$	AMERICAN MEDICAL ASSOCIATION P	OLITICAL	ACTION COMMITTEE	
_				
۹.	Full Name (Last, First, Middle Initial) IOWA MEDICAL PAC			Date of Receipt
	Mailing Address 1001 GRAND AVENUE			02 28 2006
	City	State	Zip Code	Transaction ID: SA11A1.18120
	W. DES MOINES	IA	50265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1170.00
	Name of Employer N/A	Occupation N/A	1	
	Receipt For:		Year-to-Date ▼	-
	Primary General	7.99.094.0		
	Other (specify)		7010.00	
3.	Full Name (Last, First, Middle Initial) KANSAS MEDICAL PAC			Date of Receipt
	Mailing Address 623 SW 10TH			02 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.18071
	TOPEKA	KS	66612	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		14580.00
	Name of Employer	Occupation	1	7
	N/A	N/A		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	14580.00	
	Cities (Speedily)	0 0		
<u> </u>	Full Name (Last, First, Middle Initial) KANSAS MEDICAL PAC			Date of Receipt
	Mailing Address 623 SW 10TH			M M / D D / Y Y Y Y
	21.			02 17 2006
	City TOPEKA	State KS	Zip Code 66612	Transaction ID: SA11A1.18107
			00012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3270.00
	Name of Employer N/A	Occupation N/A	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		17850.00	
	Other (specify) ▼		1,000.00	
SI	UBTOTAL of Receipts This Page (optional)			19020.00
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TOTAL This Period (last page this line number only) .....

PAGE 18 / 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LOUISIANA MEDICAL PAC Date of Receipt Mailing Address 6767 PERKINS ROAD 02 17 2006 City State Zip Code Transaction ID: SA11A1.18113 **BATON ROUGE** 70802 Amount of Each Receipt this Period FEC ID number of contributing 610.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 5470.00 Other (specify) Full Name (Last, First, Middle Initial) B. LOUISIANA MEDICAL PAC Date of Receipt Mailing Address 6767 PERKINS ROAD 02 28 2006 City State Zip Code Transaction ID: SA11A1.18124 **BATON ROUGE** LA 70802 Amount of Each Receipt this Period FEC ID number of contributing C 1440.00 federal political committee. Name of Employer Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 6910.00 Other (specify) Full Name (Last, First, Middle Initial) C. MINNESOTA MEDICAL PAC Date of Receipt Mailing Address PO BOX 18655 02 28 2006 Citv State Zip Code Transaction ID: SA11A1.18126 **MINNEAPOLIS** MN 55418 Amount of Each Receipt this Period FEC ID number of contributing 710.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 1170.00 Other (specify) 2760.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 49
ITEMIZED RECEIPTS			or each category of the	(check only one)
TI EIMIZED TIEGEII TO			Detailed Summary Page	X 11a 11b 11c 12
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Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	AMERICAN MEDICAL ASSOCIATION F	POLITICAL	ACTION COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) MISSISSIPPI MEDICAL PAC			Date of Receipt
	Mailing Address PO BOX 2548			02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.18110
	RIDGELAND	MS	39158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2050.00
	Name of Employer N/A	Occupation N/A	١	
	Receipt For:		e Year-to-Date ▼	-
	Primary General	7.99.094.0		
	Other (specify) ▼	0 0	4770.00	
В.	Full Name (Last, First, Middle Initial) MISSOURI MEDICAL PAC			Date of Receipt
	Mailing Address PO BOX 1402			0 2 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.18085
	JEFFERSON CITY	MO	65102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		7480.00
	Name of Employer N/A	Occupation N/A	٦	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		13270.00	
<u> </u>	Full Name (Last, First, Middle Initial) MONTANA MEDICAL PAC			Date of Receipt
	Mailing Address 2021 ELEVENTH AVEN	UE		0 2 0 6 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.18069
	HELENA	MT	59601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		550.00
	Name of Employer N/A	Occupation N/A	1	
	Receipt For:	1	e Year-to-Date ▼	1
	Primary General			
	Other (specify) ▼		950.00	
	UDTOTAL (During TU D. ( ) " "			10080.00
Ls	UBTOTAL of Receipts This Page (optional)		<u> </u>	

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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 49
ITEMIZED RECEIPTS			or each category of the	(check only one)
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Ar or	ny information copied from such Reports and Staten for commercial purposes, other than using the name	ments may ne and add	ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
)	AMERICAN MEDICAL ASSOCIATION PO	DITICAL	ACTION COMMITTEE	
/	7	, , , , , , , , , , , , , , , , , , , ,	7.07.01.001.001.001.001	
	Full Name (Last, First, Middle Initial)			
۹.	NEBRASKA MEDICAL PAC			Date of Receipt
	Mailing Address 233 S 13TH STREET			02 28 2006
	City	State	Zip Code	
	LINCOLN	NE	68508	Transaction ID: SA11A1.18118
		INL	00000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	rederal political committee.			
	NI/A ' '	Occupation	1	
		V/A		
		Aggregate	Year-to-Date ▼	
	Primary General		650.00	
	Other (specify)	0 0		
	Full Name (Last, First, Middle Initial)			+
3.	NEW JERSEY MEDICAL PAC			Date of Receipt
	Mailing Address 2 PRINCESS ROAD		M M / D D / Y Y Y Y	
			02 13 2006	
	City	State	Zip Code	Transaction ID: SA11A1.18087
	LAWRENCEVILLE	NJ	08648	Amount of Each Receipt this Period
	FEC ID number of contributing	С		850.00
	federal political committee.	0		
	Name of Employer	Occupation	1	7
	N/A · · ·	N/A		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		3050.00	
	Other (specify) ▼	1 1	3030.00	
	Full Name (Last First Middle 1995)			
Э.	Full Name (Last, First, Middle Initial) OREGON MEDICAL PAC			Date of Receipt
	Mailing Address 5210 SW CORBETT STRE	EET		M M / D D / Y Y Y Y
				02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.18112
	PORTLAND	OR	97201	Amount of Each Receipt this Period
	FEC ID number of contributing	С		2465.00
	federal political committee.			
	Name of Employer N/A	Occupation	1	7
	N/A	V/A		
		Aggregate	Year-to-Date ▼	
	Primary General	-	6415.00	
	Other (specify) ▼		0413.00	
_	UDTOTAL (D. 11 THE D. 11 THE			3965.00
S	UBTOTAL of Receipts This Page (optional)		······	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 49 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	
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Ar or	ly information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	AMERICAN MEDICAL ASSOCIATION PO	OLITICAL	ACTION COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) PENNSYLVANIA MEDICAL PAC			Date of Receipt
	Mailing Address PO BOX 8820			02 13 2006
	City	State	Zip Code	Transaction ID: SA11A1.18086
	HARRISBURG	PA	17105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2250.00
	NI/A	Occupation N/A	1	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼		9950.00	
В.	Full Name (Last, First, Middle Initial) PENNSYLVANIA MEDICAL PAC			Date of Receipt
	Mailing Address PO BOX 8820			02 28 2006
	City	State	Zip Code	Transaction ID: SA11A1.18123
	HARRISBURG	PA	17105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		900.00
		<u> </u>		_
	NI/A	Occupation N/A	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		10050.00	1
	Other (specify) ▼		10850.00	
<u> </u>	Full Name (Last, First, Middle Initial) RHODE ISLAND MEDICAL PAC			Date of Receipt
	Mailing Address 235 PROMENADE STRE	ET		0 2 1 7 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.18104
	PROVIDENCE	RI	02908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			1820.00
	NI/A ' '	Occupation N/A	ו	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2090.00	
s	UBTOTAL of Receipts This Page (optional)			4970.00
	1 9-1-1		<b>_</b>	

SCHEDULE A (FEC Form	3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 49
ITEMIZED RECEIPTS	•	or each category of the	(check only one)
		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any information copied from such Report or for commercial purposes, other than u	s and Statements may sing the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
AMERICAN MEDICAL ASSOCI	ATION POLITICAL	ACTION COMMITTEE	_
Full Name (Last, First, Middle Initial) SOUTH CAROLINA MEDICAL PAC			Date of Receipt
Mailing Address PO BOX 11188			02 13 2006
City	State	Zip Code	Transaction ID: SA11A1.18088
COLUMBIA	SC	29211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer NA	Occupation NA	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		2410.00	]
Full Name (Last, First, Middle Initial)  SOUTH DAKOTA MEDICAL PAC	<u>'</u>		Date of Receipt
Mailing Address 1323 S MINNES	SOTA AVENUE		02 06 2006
City	State	Zip Code	Transaction ID: SA11A1.18068
SIOUX FALLS	SD	57105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		400.00
Name of Employer N/A	Occupation N/A	n	
Receipt For:		e Year-to-Date ▼	_
Primary General	30 0		1
Other (specify) ▼	0 0	400.00	
Full Name (Last, First, Middle Initial)  TEXAS MEDICAL PAC			Date of Receipt
Mailing Address 401 W 15TH ST	REET		02 17 2006
City	State	Zip Code	Transaction ID: SA11A1.18111
AUSTIN	TX	78701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		51690.00
Name of Employer N/A	Occupation N/A	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		126740.00	
SUBTOTAL of Receipts This Page (opt	ional)		53090.00
		<u> </u>	
<b>TOTAL</b> This Period (last page this line)	number only)		

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 23 / 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) WEST VIRGINIA MEDICAL PAC Date of Receipt Mailing Address PO BOX 4106 02 28 2006 City State Zip Code Transaction ID: SA11A1.18119 **CHARLESTON** W۷ 25364 Amount of Each Receipt this Period FEC ID number of contributing 360.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 2810.00 Other (specify) Full Name (Last, First, Middle Initial) B. WISCONSIN PHYSICIANS MEDICAL PAC Date of Receipt Mailing Address PO BOX 2295 02 06 2006 City Zip Code State Transaction ID: SA11A1.18074 **MADISON** WI 53701 Amount of Each Receipt this Period FEC ID number of contributing C 650.00 federal political committee. Name of Employer Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) C. WYOMING MEDICAL PAC Date of Receipt Mailing Address PO DRAWER 4009 02 06 2006 Zip Code Citv State Transaction ID: SA11A1.18064 **CHEYENNE** WY 82003 Amount of Each Receipt this Period FEC ID number of contributing 1900.00 C federal political committee. Name of Employer Occupation NA Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) 2910.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 24 / 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) INDEPENDENT MEDICINES PAC Date of Receipt Mailing Address 2301 21ST AVENUE SOUTH 02 28 2006 City Zip Code State Transaction ID: SA11A1.18125 **NASHVILLE** ΤN 37212 Amount of Each Receipt this Period FEC ID number of contributing 7100.00 C federal political committee. Name of Employer N/A Occupation N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 8270.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL E MIGLIORI, MD Date of Receipt Mailing Address 690 EDDY STREET 02 06 2006 City State Zip Code Transaction ID: SA11A1.18134 **PROVIDENCE** RI 02903 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ROBERT C MORE, MD Date of Receipt Mailing Address 6 SAND HILL ROAD 02 02 2006 Zip Code Citv State Transaction ID: SA11A1.18084 **FLEMINGTON** NJ 08822 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer HUNTERDON ORTHO Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 8100.00 SUBTOTAL of Receipts This Page (optional) .....

S(	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	-OR LINE NUMBER: PAGE 25 / 49					
	EMIZED RECEIPTS		or each category of the	(check only one)  X 11a 11b 11c 12					
			Detailed Summary Page	13 14 15 16 17					
An or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
/	AMERICAN MEDICAL ASSOCIATION PO	DLITICAL	ACTION COMMITTEE						
۹.	Full Name (Last, First, Middle Initial) WILLIAM G PLESTED, MD			Date of Receipt					
	Mailing Address 405 N KENTER AVENUE			02 02 2006					
	City	State	Zip Code	Transaction ID: SA11A1.18052					
	LOS ANGELES	CA	90049	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	SELE-EMDI'OVED	Occupation PHYSICI.							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		500.00						
3.	Full Name (Last, First, Middle Initial) SUNEIL RAMCHANDANI, MD	Date of Receipt							
	Mailing Address 10423 MONTROSE AVEN	02 20 2006							
	City	State	Zip Code	Transaction ID: SA11A1.18140					
	BETHESDA	MD	20814	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	SELE-EMDI'OVED	Occupation PHYSICI							
			Year-to-Date ▼						
	Primary General	1 1	250.00						
	Other (specify)	0 0	230.00						
Э.	Full Name (Last, First, Middle Initial) ABHAY SANAN, MD			Date of Receipt					
	Mailing Address 5245 N VENTANA VISTA	ROAD		02 01 2006					
	City	State	Zip Code	Transaction ID: SA11A1.18128					
	TUCSON	AZ	85750	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	CENTED OF MELIDOSCIENCE	Occupation PHYSICI.							
		Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		500.00						
s	UBTOTAL of Receipts This Page (optional)			1250.00					
_	OTAL This Period (last page this line number only	٨							
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			FOR LINE NUMBER DAGE 22 / 12							
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 49 (check only one)							
ITEMIZED RECEIPTS		or each category of the								
TENIZED RESENTES		Detailed Summary Page	X 11a 11b 11c 12							
	_		13 14 15 16 17							
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may ame and add	or not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
AMERICAN MEDICAL ASSOCIATION P	OLITICAL	ACTION COMMITTEE								
/										
Full Name (Last, First, Middle Initial)  A. STEVEN SAUERBERG, MD			Date of Receipt							
Mailing Address 5201 WILLOW SPRINGS	S ROAD		M M / D D / Y Y Y Y							
011	01-1-	7's Oads	02 23 2006							
City	State IL	Zip Code	Transaction ID: SA11A1.18142							
LAGRANGE	IL.	60525	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		500.00							
Name of Employer FAMILY MEDICAL CTR OF LAG-	Occupation		7							
RANGE	PHYSICI									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify)		500.00								
Curer (specify)	0 0		1							
Full Name (Last, First, Middle Initial)  3. PENNY MAUREEN STERN, MD			Date of Receipt							
Mailing Address 16719 75TH AVENUE			M M / D D / Y Y Y Y							
-			02 14 2006							
City	State	Zip Code	Transaction ID: SA11A1.18098							
FLUSHING	NY	11366	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		500.00							
Name of Employer	Occupation	1	$\dashv$							
Name of Employer PFIZER	PHYSICI									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		500.00	1							
Other (specify)	0 0	300.00								
Full Name (Last, First, Middle Initial)			+							
MEDICAL SOC OF THE ST OF NY PAC			Date of Receipt							
Mailing Address ONE COMMERCE PLAZ	Ά		02 13 2006							
City	State	Zip Code	Transaction ID: SA11A1.18090							
ALBANY	NY	12210	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		17660.00							
Name of Employer	Occupation		_							
Name of Employer N/A	Occupation N/A	I								
Receipt For:	-	Year-to-Date ▼	7							
Primary General		00000 00	1							
Other (specify) ▼		28360.00	1							
SUBTOTAL of Receipts This Page (optional)			18660.00							
d			-							

PAGE 27 / 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JOHN W THOMAS, MD Date of Receipt Mailing Address 3519 FRIENDSVILLE ROAD 02 14 2006 City Zip Code State Transaction ID: SA11A1.18096 WOOSTER OH 44691 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. LYLE SHELDON THORSTENSON, MD Date of Receipt Mailing Address PO BOX 632020 02 13 2006 City State Zip Code Transaction ID: SA11A1.18136 **NACOGDOCHES** TX 75963 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JAMES TIMMONS, MD Date of Receipt Mailing Address 21 LYNWOOD DRIVE 14 02 2006 Citv State Zip Code Transaction ID: SA11A1.18094 **BATTLE CREEK** MI 49015 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer RADIOLOGY CONSULTANTS Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional) .....

FOR LINE NUMBER: PAGE 28 / 49 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) THERESA A WAXMAN Date of Receipt Mailing Address ROT 1 BOX 352 0 2 14 2006 City Zip Code State Transaction ID: SA11A1.18103 **CLARKSBURG** W۷ 26301 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer N/A Occupation **HOUSEWIFE** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	500.00
TOTAL This Period (last page this line number only)	<b>•</b>	176285.00

### **SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 29 / 49 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 **X** 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) PNC ADVISORS Date of Receipt Mailing Address PO BOX 96211 0 2 28 2006 City Zip Code State Transaction ID: SA17.18149 **WASHINGTON** DC 20090 Amount of Each Receipt this Period FEC ID number of contributing C 7309.87 federal political committee. **INTEREST** Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 13767.59 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	7309.87
TOTAL This Period (last page this line number only)	<b>•</b>	7309.87

### Image# 26920025643

State:

### **SCHEDULE B (FEC Form 3X)**

District:

FOR LINE NUMBER: PAGE 30 / 49 Use seperate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the Detailed Summary Page 21b 23 26 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21B.18044 A. FIRST NATIONAL MERCHANT SOLUTIONS Date of Disbursement 28 0 2 2006 Mailing Address 1620 DODGE STREET City State Zip Code Amount of Each Disbursement this Period **OMAHA** NE 68197 921.67 Purpose of Disbursement CREDIT CARD BANK CHARGES 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify)

		004.67
SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	921.67
TOTAL This Period (last page this line number only)	•	921.67

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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			_	ıb _	22 28a	X	23 28b	$\blacksquare$	24 28c	_	25 29	26 30b	
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													5	
Ĭ.	NAME OF COMMITTEE (In Full)	- and address of any pointed			iittoo	10 00110	) ( OOI ( )	ibat	0110 111	0111 0	4011 00	,,,,,,,,,			
$\rangle$	AMERICAN MEDICAL ASSOCIATION PO	LITICAL ACTION COM	MITT	E	Έ										
Α.	Full Name (Last, First, Middle Initial)									_	23.18	032			
Λ.	AL GREEN FOR CONGRESS								sburs		nt / Y	Υ	Y	Υ	
	Mailing Address 3003 SOUTH LOOP WE		0 <sup>M</sup> 2	М	2	27		2 0	) Ó 6						
	City HOUSTON	State Zip Code TX 77054					Amou	int o	f Each	Dist	oursem	ent t	his P	eriod	
	Purpose of Disbursement 2006 PRIMARY			0	11	$\neg$						10	00.0	0	
	Candidate Name AL GREEN		Ca	ate	egory ype	/									
	X	ement For: 2006 Primary General Other (specify)	•												
	Full Name (Last, First, Middle Initial)						Trans	anti	on ID	. 00'	23.18	01/			
B.	BAKER FOR CONGRESS COMMITTEE						Date	of D	sburs	emen			V °	V	
	Mailing Address PO BOX 1694						0 2	М	<sup>D</sup> 2	2 1	/ Y	ž 0	ó 6	Y	
	City BATON ROUGE	State Zip Code LA 70821					Amou	int o	f Each	Disb	oursem			-	
	Purpose of Disbursement 2006 PRIMARY 011										0	25	00.C	0	
	Candidate Name RICHARD HUGH BAKER				egory ype	/									
	Senate X President	ement For: 2006 Primary General Other (specify)													
	State: LA District: 06														
C.	Full Name (Last, First, Middle Initial) BARRETT FOR CONGRESS						Date	of D	sburs	emen	23.18 nt				
	Mailing Address PO BOX 869						0 2	М	<b>1</b>	6	/ L	ž 0	) Ó 6	Y	
	City WESTMINSTER	State Zip Code SC 29693					Amou	int o	f Each	Dist	oursem	nent t	his P	eriod	
	Purpose of Disbursement 2006 PRIMARY											10	00.0	0	
	Candidate Name JAMES GRESHAM BARRETT			egory ype	/										
	Senate X President	ement For: 2006 Primary General Other (specify)													
	State: SC District: 03							_							
s	UBTOTAL of Disbursements This Page (optional)					<u> </u>	<u>L.</u>					450	00.0	0	
Т.	OTAL This Period (last page this line number only)	)				•									

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE I	PAGE 32 / 49	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30k
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name.				
NAME OF COMMITTEE (In Full)  AMERICAN MEDICAL ASSOCIATION PO				
Full Name (Last, First, Middle Initial)  A. BARTLETT FOR CONGRESS COMMITT	EE		Date of Disburs	
Mailing Address PO BOX 245			02 / 0	10
City MIDDLETOWN	State Zip Code MD 21769		Amount of Eac	h Disbursement this Period
Purpose of Disbursement 2006 PRIMARY		011		3000.00
Candidate Name ROSCOE G JR BARTLETT		Category/ Type		
	ement For: 2006  Primary General  Other (specify)			
Full Name (Last, First, Middle Initial)  BOYD FOR CONGRESS			Transaction ID	D: SB23.17995 Sement
Mailing Address PO BOX 15703			02 M	0 9 Y 2 0 0 6 Y
City TALLAHASSEE	State Zip Code FL 32317		Amount of Eac	h Disbursement this Period
Purpose of Disbursement 2006 PRIMARY		011		2500.00
Candidate Name F ALLEN JR BOYD		Category/ Type		
· -	ement For: 2006 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS			Transaction IE Date of Disburs	D: SB23.18023 Sement
Mailing Address PO BOX 8277			0 2 M	17 2006
City WOODLANDS	State Zip Code TX 77387		Amount of Eac	h Disbursement this Period
Purpose of Disbursement 2006 PRIMARY		011		3000.00
Candidate Name KEVIN PATRICK BRADY		Category/ Type		
	ement For: 2006 Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				8500.00
TOTAL This Period (last page this line number only				

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check on	= NUMBER: lv one)	19						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	<u> </u>	X 23 28b	24 28c	25 29	26 30b			
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							s			
NAME OF COMMITTEE (In Full)	and address of any political co	minitiee to s	Chort Corntrib	410113 110	an Sucii C	- Committee				
AMERICAN MEDICAL ASSOCIATION PO	LITICAL ACTION COMMIT	TEE								
Full Name (Last, First, Middle Initial)					SB23.1	7982				
BRIAN BILBRAY FOR CONGRESS				Disburse		Y Y	Υ			
Mailing Address 2466 UNICORNIO STRE	ET		M2 M / D0 9 / Y Y Y O Y 6 Y							
City CARLSBAD	State Zip Code CA 92009		Amount	of Each	Disburse	ment this F				
Purpose of Disbursement 2006 PRIMARY SPECIAL	Г	011				5000.0	00			
Candidate Name BRIAN PHILLIP BILBRAY	(	Category/ Type								
	ment For: 2006									
Senate President X	Primary General Other (specify) ▼									
	-Primary									
Full Name (Last, First, Middle Initial)	.00				SB23.18	8015				
5. CHARLES BOUSTANY JR FOR CONGRE	.55		M M	Disburse / D	D / Y	YY	Υ			
Mailing Address PO BOX 80126			0 2	2	1 _	ž 0 ŏ 6				
City LAFAYETTE	State Zip Code LA 70598		Amount	of Each	Disburse	ment this F	Period			
Purpose of Disbursement 2006 PRIMARY	<u> </u>			2500.0	00					
Candidate Name JR, CHARLES W. BOUSTANY		011 Category/ Type								
X	ment For: 2006 Primary General									
President	Other (specify)									
State: LA District: 07										
Full Name (Last, First, Middle Initial)  CHARLIE MELANCON CAMPAIGN COMM	MITTEE			Disburse		8011				
Mailing Address PO BOX 549			0 2	<sup>′</sup> <sup>D</sup> 2	1 / Y	ž 0 0 6	S Y			
City NAPOLEONVILLE	State Zip Code LA 70390		Amount	of Each	Disburse	ment this F	Period			
Purpose of Disbursement 2006 PRIMARY		011	1 L.			1000.0	00			
Candidate Name CHARLIE JR MELANCON		Category/ Type								
· —	ment For: 2006 Primary General									
President State: LA District: 03	Other (specify)									
Side. Let District 00										
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>				8500.0	00			
TOTAL This Period (last page this line number only)			L.							

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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			_	ıb _	22 28a	X	23 28b		24 28c	П	25 29	26 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													s
	NAME OF COMMITTEE (In Full)	e and address of any pointer	u com		iittoc	10 30110	on conti	ibuti	10113 11	0111 3	uon co	JIIIII	iittoc	
$\rangle$	AMERICAN MEDICAL ASSOCIATION PO	PLITICAL ACTION COM	MITT	Έ	Ε									
Α.	Full Name (Last, First, Middle Initial) CHET EDWARDS FOR CONGRESS								on ID:	_	23.18 nt	020	)	
	Mailing Address PO BOX 23273								/ D 1	1 <sup>D</sup>	/ Y	ž	0 ŏ 6	S
	City WACO	State Zip Code TX 76702					Amou	int o	f Each	n Disl	bursen	-		
	Purpose of Disbursement 2006 PRIMARY			0	11		L.	_				2	500.	00
	Candidate Name CHET EDWARDS				egory ype	/								
	X	ement For: 2006 Primary General Other (specify)												
_	Full Name (Last, First, Middle Initial)						Trons		an ID	. CD	23.17	'00E	-	
B.	CITIZENS FOR CHURCHILL						Date		isburs	emer	_			Υ
	Mailing Address PO BOX 505						0 2		C	9	L	2	o ŏ e	5
	City GRAYSLAKE	State Zip Code IL 60030					Amou	int o	f Each	n Disl	bursen			
	Purpose of Disbursement 2006 PRIMARY		-		11		L.		_			, 51	000.	J0
	Candidate Name ROBERT W CHURCHILL				egory ype	/								
	Senate X President	ement For: 2006 Primary General Other (specify)	•											
	State: IL District: 08  Full Name (Last, First, Middle Initial)													
C.	COMMITTEE TO REELECT BOBBY JIND	AL					Date		on ID: isburs		23.18 nt			V
	Mailing Address PO BOX 8628						0 2			2 1	Ĺ	2	0 Ď 6	3
	City METAIRIE	State Zip Code LA 70011					Amou	int o	f Each	n Disl	bursen	-	-	
	Purpose of Disbursement 2006 PRIMARY			0	11		L.		_			, 30	000.	00
	Candidate Name Category/ BOBBY JINDAL Type													
	Senate X President	ement For: 2006 Primary General Other (specify)	•											
	State: LA District: 01											_		
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IT	EMIZED DISBURSEMENTS		category of the Summary Page	21b 27	22 2	3 24 8b 28c	2 2				
	y Information copied from such Reports and State for commercial purposes, other than using the nar										
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PO										
۹.	Full Name (Last, First, Middle Initial) COMMITTEE TO REELECT VITO FOSS	ELLA			Date of Disk		17994				
	Mailing Address PO BOX 131403				02 /	09 /	ž 0	06°			
	City STATEN ISLAND	State NY	Zip Code 10313		Amount of E	Each Disburs	ement th	nis Period			
	Purpose of Disbursement 2006 PRIMARY			011			100	00.00			
	Candidate Name FOSSELLA, VITO JR.			Category/ Type							
		sement For:  X Primary  Other (spe	2006 General								
3.	Full Name (Last, First, Middle Initial) COSTELLO FOR CONGRESS COMMIT	Transaction ID: SB23.17988 Date of Disbursement									
	Mailing Address PO BOX 8250				02 /	09 /	Ý Ž0	0 6			
	City BELLEVILLE	State IL	Zip Code 62222		Amount of E	ach Disburs	ement th	nis Period			
	Purpose of Disbursement 2006 PRIMARY			011			100	00.00			
	Candidate Name JERRY F COSTELLO			Category/ Type							
	-	sement For:  X Primary  Other (spe	2006 General								
	Full Name (Last, First, Middle Initial) CULBERSON FOR CONGRESS					n ID: SB23.	18031				
	Mailing Address 9407 WALNUT BROOK		Date of Disk	2 7	Ý Ž O	0 6 °					
	City	State	Zip Code		Amount of E	ach Disburs	ement th	nis Period			
	HOUSTON Purpose of Disbursement	TX	77040		-	• • • •	200	00.00			
	2006 PRIMARY  Candidate Name JOHN A CULBERSON		011 Category/								
	Office Sought: X House Disburs	sement For:  X Primary  Other (spe	2006 General	Туре							
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	<u> </u>	<u>,                                      </u>		·········	•			* *			
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										S
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PO										
۸.	Full Name (Last, First, Middle Initial) DAN LIPINSKI FOR CONGRESS  Mailing Address 4501 GRAND						of Disbur	D: SB23.1 sement		4 0 ŏ 6	Y
			02 03 2000								
	City WESTERN SPRINGS		Amou	int of Eac	h Disburse	emen	t this F	Period			
	Purpose of Disbursement 2006 PRIMARY				011				. 1	0.00.0	00
	Candidate Name DANIEL WILLIAM LIPINSKI				ategory/ Type						
		ment For: Primary Other (spe	2006 General								
3.	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE						saction II of Disbur	D: SB23.1 sement	797	9	
	Mailing Address 430 SOUTH CAPITOL S		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	•	State DC	Zip Code 20003			Amou	ınt of Eac	h Disburse			-
	Purpose of Disbursement 2006 ANNUAL CONTRIBUTION				011	<u>L.</u>			15	000.0	00
	Candidate Name				ategory/ Type						
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼								
Э.	Full Name (Last, First, Middle Initial) DOGGETT FOR US CONGRESS COMMI	TTEE				1	of Disbur		804	0	
	Mailing Address PO BOX 5843					0 <sup>M</sup> 2	M / D	27 /	ž	0 ŏ 6	S Y
		State TX	Zip Code 78763			Amou	ınt of Eac	h Disburse	emen	t this F	Period
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	Candidate Name LLOYD DOGGETT		ategory/ Type								
		ment For: Primary Other (spe	2006 General								
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NAME OF COMMITTEE (In Full)	and address of any political co		mon continuu		Such Colli	THE CO	
AMERICAN MEDICAL ASSOCIATION POL	ITICAL ACTION COMMIT	TEE					
Full Name (Last, First, Middle Initial)				_	B23.1799	)1	
OONALD A MANZULLO FOR CONGRESS				)isbursem		(	7
Mailing Address PO BOX 7783			0 2	09	2	6 0 ŏ 6 `	
,	tate Zip Code L 61125		Amount	of Each Di	sbursemer		-
Purpose of Disbursement 2006 PRIMARY		011				2000.00	0
Candidate Name DONALD A MANZULLO		Category/ Type					
Office Sought: X House Disburser							
	Primary General Other (specify) ▼						
State: IL District: 16	· · · · · · · · · · · · · · · · · · ·						
Full Name (Last, First, Middle Initial)					B23.1804	-3	
5. EDDIE BERNICE JOHNSON FOR CONGR	ESS		M M	Disbursem		(	7
Mailing Address 2501 CEDAR SPRINGS A	VENUE		0 2	27	2	6 0 ŏ 6 `	
,	tate Zip Code TX 75201		Amount	of Each Di	sbursemer		-
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Candidate Name EDDIE BERNICE JOHNSON		Category/ Type					
Office Sought: X House Disburser Senate X	nent For: 2006 Primary General						
	Other (specify)						
State: TX District: 30							
Full Name (Last, First, Middle Initial) FRIENDS OF JEB HENSARLING				isbursem		30	
Mailing Address PO Box 820504			0 2	<sup>D</sup> 2 7	/ Y 2	2 0 0 6 °	
,	tate Zip Code "X 75382		Amount	of Each Di	sbursemer	nt this Pe	eriod
Purpose of Disbursement 2006 PRIMARY	Г	011	L		:	2000.00	)
Candidate Name THOMAS JEB HENSARLING		Category/ Type					
Office Sought: X House Disburser							
	Primary General Other (specify) ▼						
State: TX District: 05	· · · · · · · · · · · · · · · · · · ·						
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POL	LITICAL ACTION COMM	ИІТТЕ	E						
۹.	Full Name (Last, First, Middle Initial) FRIENDS OF RAY LAHOOD  Mailing Address 4238 N KNOXVILLE AVE	<u>.</u>			Date	eaction ID of Disburs			) ŏ 6	Y
	•	State Zip Code IL 61614			Amou	int of Each	Disburse	ement	this P	eriod
	Purpose of Disbursement 2006 PRIMARY Candidate Name			11	<u> </u>		· · · · ·	20	0.00	0
	RAY LAHOOD	ment For: 2006		egory/ /pe						
		Primary General Other (specify)								
3.	Full Name (Last, First, Middle Initial) FRIENDS OF SAM JOHNSON				Date	saction ID of Disburs	ement			
	Mailing Address PO BOX 860096				0 2	M / D	7 /	ž	o ŏ 6	<u> </u>
	PLANO	State Zip Code TX 75086			Amou	int of Each	n Disburse		this P	-
	Purpose of Disbursement 2006 PRIMARY Candidate Name SAMUEL ROBERT JOHNSON		Cate	11 egory/				, 00	,00.0	
	Office Sought: X House Disburse	ment For: 2006 Primary General Other (specify)	<u> </u>	/pe						
Э.	Full Name (Last, First, Middle Initial) FRIENDS OF TIM JOHNSON				Date	action ID of Disburs	ement	7990		
	Mailing Address PO BOX 17097				0 <sup>M</sup> 2	M / D	9 /	ž	o ŏ 6	Y
	UŔBANA	State Zip Code IL 61820			Amou	int of Each	Disburse		this P	-
	Purpose of Disbursement 2006 PRIMARY Candidate Name		-	11 egory/		•			00.0	0
		ment For: 2006		/pe						
	Senate X President State: IL District: 15	Primary General Other (specify) ▼								
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	NAME OF COMMITTEE (In Full)													
$\rangle$	AMERICAN MEDICAL ASSOCIATION PO	LITICAL ACTION COM	MITT	ΓΕ	Ε									
Α.	Full Name (Last, First, Middle Initial) GARD FOR CONGRESS								on ID	_	_	800	7	
								M D	isburs	eme I 6	nt / Y	Y	0 Ď 6	Y
	Mailing Address PO BOX 277						0.2			ΙЬ		. 2	006	•
	City GREEN BAY	State Zip Code WI 54305					Amou	ınt o	f Each	n Dis	burse	ment	this I	Period
	Purpose of Disbursement 2006 PRIMARY			•	44	7						2	500.	00
	Candidate Name JOHN G. GARD		Ca	ate	11 egory	,								
		ement For: 2006		Ly	/pe									
		Primary General												
	State: WI District: 08	Other (specify)												
В.	Full Name (Last, First, Middle Initial)	MICNI					Trans		-			8042	2	
	GENE GREEN CONGRESSIONAL CAMP	AIGN					М	of D	isburs	eme 2 7	nt / Y	Y	οŏε	Y
	Mailing Address PO BOX 16128						0 2		2	2 /		. 2	006	Ď.
	City HOUSTON	State Zip Code TX 77222					Amou	ınt o	f Each	n Dis	burse	ment	this I	Period
	Purpose of Disbursement 2006 PRIMARY			٥	11	7	L.	0				2	500.	00
	Candidate Name RAYMOND EUGENE 'GENE' GREEN		Ca	ate	egory/ pe	′								
	ů X	ement For: 2006 Primary General	•											
	President	Other (specify)												
	State: TX District: 29  Full Name (Last, First, Middle Initial)											700	_	
C.	GERALD C 'JERRY' WELLER FOR CON	GRESS					Date	of D	on ID isburs	eme				
	Mailing Address PO BOX 2368						0 2	М	<sup>/</sup> D	9	/ L	ž	οŏ	3 Y
	City JOLIET	State Zip Code IL 60434					Amou	ınt o	f Each	n Dis	burse	ment	this	Period
	Purpose of Disbursement 2006 PRIMARY			0	11	7	L.						500.	00
	Candidate Name GERALD C 'JERRY' WELLER				egory/	′								
		ement For: 2006 Primary General	-		<u>.                                    </u>									
	President State: IL District: 11	Other (specify)												
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	OTAL This Period (last page this line number only)					<b>-</b>								

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	y Information copied from such Reports and Statem for commercial purposes, other than using the name							3
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION POL							
۹.	Full Name (Last, First, Middle Initial) GONZALEZ FOR CONGRESS  Mailing Address 206 EAST LOCUST STR	EET			Transaction I Date of Disbu		037 Ž 0 Ŏ 6	Y
		State Zip Co TX 7821:			Amount of Ea	ch Disbursen		
	Purpose of Disbursement 2006 PRIMARY			011			2500.0	00
	Candidate Name CHARLES A GONZALEZ			Category/ Type				
	Office Sought:  X House Senate President State: TX District: 20		006 General					
3.	Full Name (Last, First, Middle Initial) GOODE FOR CONGRESS				Transaction I		005	
	Mailing Address 235 SOUTH MAIN STRE	ET			02 /	16 / Y	ž 0 0 6	Y
	•	State Zip Co VA 2415			Amount of Ea	ch Disbursen	ent this P	eriod
	Purpose of Disbursement 2006 PRIMARY						3000.0	00
	Candidate Name VIRGIL H JR GOODE			Category/ Type				
	Office Sought:  X House Senate President State: VA District: 05		006 General					
Э.	Full Name (Last, First, Middle Initial) HALL FOR CONGRESS COMMITTEE				Transaction I Date of Disbu	rsement		
	Mailing Address PO BOX 711				02 /	27 / Y	ž 0 ŏ 6	Y
		State Zip Co TX 7508			Amount of Ea	ch Disbursen		-
	Purpose of Disbursement 2006 PRIMARY			011			3500.0	00
	Candidate Name RALPH M HALL			Category/ Type				
	Office Sought:  X House Senate President State: TX District: 04  Disburse X		006 General					
S	UBTOTAL of Disbursements This Page (optional) .			<u></u>			9000.0	0
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	y Information copied from such Reports and Staten or commercial purposes, other than using the nam								
$\rangle$	NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PO								
۹.	Full Name (Last, First, Middle Initial) JUDY BIGGERT FOR CONGRESS				Transaction I Date of Disbu			ý 6 °	
	Mailing Address P.O. Box 637				02	0 9	20	0.6	
	City HINDSDALE	State Zip Code IL 60522			Amount of Ea	ch Disburse			_
	Purpose of Disbursement 2006 PRIMARY			011			20	00.00	_
	Candidate Name JUDY BIGGERT		С	ategory/ Type					
		ement For: 2006 Primary General Other (specify)							
3.	Full Name (Last, First, Middle Initial) KAY BAILEY HUTCHISON FOR SENATE				Transaction I		8026		_
	Mailing Address PO BOX 9190				02 /	27	ž0	0 6 °	
	City DALLAS	State Zip Code TX 75209			Amount of Ea	ch Disburse	ment t	nis Period	_ ¬
	Purpose of Disbursement 2006 PRIMARY			011			50	00.00	_
	Candidate Name KAY BAILEY HUTCHISON		С	ategory/ Type					
		ement For: 2006 Primary General Other (specify)							
Э.	Full Name (Last, First, Middle Initial) KAY GRANGER CAMPAIGN FUND				Transaction I		8017		
	Mailing Address 910 HOUSTON STREET	Γ			02 /	17	Ž0	0 6 °	
	City FORT WORTH	State Zip Code TX 76102			Amount of Ea	ch Disburse	ement t	nis Period	_
	Purpose of Disbursement 2006 PRIMARY		Г	011			30	00.00	
	Candidate Name KAY GRANGER		С	ategory/ Type					
		ement For: 2006 Primary General Other (specify)							
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NAME OF COMMITTEE (In Full)	and address of any political co		non continu	uona mum	Such COIII	muce	
AMERICAN MEDICAL ASSOCIATION POL	ITICAL ACTION COMMIT	TEE					
Full Name (Last, First, Middle Initial)				_	B23.1802	24	
KELLER FOR CONGRESS				isbursem		/ ` Y ` '	Y
Mailing Address PO BOX 1453			02	<sup>/</sup> <sup>D</sup> 23	2	2006	
	State Zip Code FL 32802		Amount o	of Each Di	sbursemer		-
Purpose of Disbursement 2006 PRIMARY	Г	011				2500.0	0
Candidate Name RICHARD ANTHONY KELLER		Category/ Type					
Office Sought: X House Disburse Senate X	nent For: 2006 Primary General						
President	Other (specify)						
State: FL District: 08							
Full Name (Last, First, Middle Initial)  KENNY MARCHANT FOR CONGRESS				ion ID: Sl	B23.1803	19	
			M M	27		006	Y
Mailing Address PO BOX 110187			0 2	27		2006	
,	State Zip Code FX 75011		Amount o	of Each Di	sbursemer	nt this Pe	eriod
Purpose of Disbursement 2006 PRIMARY		011				2500.0	0
Candidate Name KENNY EWELL MARCHANT		Category/ Type					
Office Sought: X House Disburse							
Senate X President	Primary General Other (specify) ▼						
State: TX District: 24							
Full Name (Last, First, Middle Initial)  KIRK FOR CONGRESS				isbursem		86	
Mailing Address PO BOX 8			02	0 9	/ Y 2	0 0 6	Y
,	State Zip Code L 60093		Amount o	of Each Di	sbursemer	nt this Pe	eriod
Purpose of Disbursement 2006 PRIMARY	I	011	L			2500.0	0
Candidate Name MARK STEVEN KIRK		Category/ Type					
Office Sought: X House Disburse							
Senate X President	Primary General Other (specify) ▼						
State: IL District: 10	· · · · · · · · · · · · · · · · · · ·						
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	_	21b 27		· -	X 23 28b	24		25 29	ш.	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										<u> </u>	
\ \	NAME OF COMMITTEE (In Full)				JUNUI	CONTIN	,uu0115 II	JIII SUU		·······································		
<u>/</u>	AMERICAN MEDICAL ASSOCIATION PO	LITICAL ACTION COMM	1ITTE	ΞΕ 								
۹.	Full Name (Last, First, Middle Initial) LINCOLN DIAZ-BALART FOR CONGRES	S COMMITTEE				Date of	ction ID Disburs	ement		-		
	Mailing Address 2801 PONCE DE LEON	BLVD				0 2 M	/ D	9 9 /	Ž	2 0 ŏ 6		
		State Zip Code FL 33134				Amoun	t of Each	Disbur			-	7
	Purpose of Disbursement 2006 PRIMARY			011						1000.0	IU .	
	Candidate Name LINCOLN DIAZ-BALART			tegory/ ype								
	Senate X President	ment For: 2006 Primary General Other (specify)										
	State: FL District: 21  Full Name (Last, First, Middle Initial)				+	_			4			
3.	LOUIE GOHMERT FOR CONGRESS					Date of	ction ID Disburs	ement			Υ	
	Mailing Address PO BOX 8060					0"2 "		2 7 /	2	2 0 ŏ 6		
	TÝLER	State Zip Code TX 75711				Amoun	t of Each	n Disbur			-	7
	Purpose of Disbursement 2006 PRIMARY			011						2000.0	IU .	
	Candidate Name LOUIS GOHMERT			tegory/ ype								
	Senate X President	ment For: 2006 Primary General Other (specify)										
	State: TX District: 01  Full Name (Last, First, Middle Initial)				+	Transa	ction ID	: SR23	1790	)7		
Э.	MARIO DIAZ-BALART FOR CONGRESS					Date of	Disburs	ement			Υ	
	Mailing Address 2801 PONCE DE LEON					0 2		0 9 <sup>/</sup>		2 0 ŏ 6		
	CÓRAL GABLES	State Zip Code FL 33134				Amoun	t of Each	n Disbur			-	7
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	Candidate Name MARIO DIAZ-BALART			tegory/ ype								
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	y Information copied from such Reports and Statem or commercial purposes, other than using the name										-	
$\rangle$	NAME OF COMMITTEE (In Full)  AMERICAN MEDICAL ASSOCIATION POI				301101	CONTINU	utions in	om such	COITII	intico		
۹.	Full Name (Last, First, Middle Initial) MCCAUL FOR CONGRESS  Mailing Address 3508 FAR WEST BOULE	SVARD.					Disburse	SB23. ement		3 : 0 ŏ 6	Y	
	City	State Zip Code				Amount	of Each	Disburs	emer	t this P	eriod	
	AUSTIN Purpose of Disbursement 2006 PRIMARY	TX 78731		011					2	2000.0	0	
	Candidate Name MICHAEL MCCAUL			tegory/ ype								
	X	ment For: 2006 Primary General Other (specify)										
3.	Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS						ction ID: Disburse	: SB23.	1801	2		
	Mailing Address PO BOX 52956					0 2 M	<sup>/</sup> 2	21	Ž	0 0 6	Υ	
	,	State Zip Code LA 71135				Amount	of Each	Disburs				7
	Purpose of Disbursement 2006 PRIMARY Candidate Name			011						5000.0	0	
	JAMES O III MCCRERY			tegory/ ype								
		ment For: 2006 Primary General Other (specify)										
Э.	Full Name (Last, First, Middle Initial) MIKE DEWINE FOR US SENATE						Disburs		1800	2		
	Mailing Address PO BOX 340188					0 2	/ D	6 /	ž	0 0 6	Y	
	CÓLUMBUS	State Zip Code OH 43234				Amount	of Each	Disburs	-		-	
	Purpose of Disbursement 2006 PRIMARY Candidate Name			011 tegory/						1000.0	U	
	RICHARD MICHAEL DEWINE			ype								
	· -	ment For: 2006 Primary General Other (specify)										
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$\rangle$	NAME OF COMMITTEE (In Full)  AMERICAN MEDICAL ASSOCIATION POI				301101	CONTIN	otions ii	om such	COITI	intico		
۸.	Full Name (Last, First, Middle Initial) ORTIZ FOR CONGRESS COMMITTEE  Mailing Address PO BOX 7806						ction ID:			1 0 0 6	Y	
		State Zip Code TX 78467				Amoun	t of Each	n Disburs	emen	t this P	eriod	_
	Purpose of Disbursement 2006 PRIMARY	70407		011					1	1500.0	0	]
	Candidate Name SOLOMON P ORTIZ  Office Sought: X House Disburse	ment For: 2006		tegory/ Type								
		Primary General Other (specify)										
3.	Full Name (Last, First, Middle Initial) PETE SESSIONS FOR CONGRESS					Date of	ction ID Disburs	ement	1802	2		
	Mailing Address PO BOX 38585					0 <sup>M</sup> 2 M	/ D	7 /	ž	0 0 6	Y	
	DÁLLAS	State Zip Code TX 75238				Amoun	t of Each	Disburs			-	7
	Purpose of Disbursement 2006 PRIMARY Candidate Name			011 togony/						2500.0	0	_
	PETE SESSIONS			tegory/ Type								
	9 17	ment For: 2006 Primary General Other (specify)										
Э.	Full Name (Last, First, Middle Initial) RICK RENZI FOR CONGRESS						ction ID	ement	1800	0		
	Mailing Address PO BOX 2383					0 <sup>M</sup> 2 M	/ D	I 6	ž	0 0 6	Y	
	PRESCOTT	State Zip Code AZ 86302				Amoun	t of Each	Disburs	-		-	7
	Purpose of Disbursement 2006 PRIMARY Candidate Name			011 tegory/						1000.0	U ,	_
	RICHARD GEORGE RENZI			туре Гуре								
		ment For: 2006 Primary General Other (specify)										
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NAME OF COMMITTEE (In Full)  AMERICAN MEDICAL ASSOCIATION PO	LITICAL ACTION COMMIT	TTE	Е								
Full Name (Last, First, Middle Initial)				1	Transa	ction ID	: SB23.	1801	3		
RODNEY ALEXANDER FOR CONGRESS						Disburs		V		V	
Mailing Address PO BOX 367					0 <sup>M</sup> 2 M	7 2	21	ž	0 Ó 6	Y	
•	State Zip Code LA 71268				Amount	of Each	n Disburs	-		-	T T
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Candidate Name RODNEY ALEXANDER			egory/ /pe								
	ment For: 2006 Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				١.,		ation ID	: SB23.	1001			
3. RUBEN HINOJOSA FOR CONGRESS				- 1	Date of	Disburs	ement			Y	
Mailing Address 502 NORTH 11TH STRE	ET				0 <sup>M</sup> 2 M	]	17	2	0 Ď 6		
,	State Zip Code TX 78501				Amount	of Each	n Disburs			-	i T
Purpose of Disbursement 2006 PRIMARY		0	11					1	1500.0	00	_
Candidate Name RUBEN E HINOJOSA			egory/ /pe								
Senate X President	ment For: 2006 Primary General Other (specify)										
State: TX District: 15  Full Name (Last, First, Middle Initial)				_	_		0000		_		
SHEILA JACKSON LEE FOR CONGRESS						Disburs				V	
Mailing Address 4412 ALMEDA ROAD					0 2	]	27 /	2	0 Ď 6		
	State Zip Code TX 77004				Amount	of Each	n Disburs			-	ŀ
Purpose of Disbursement 2006 PRIMARY		0	11					. 1	1000.0	00	_
Candidate Name SHEILA JACKSON LEE			egory/ /pe								
Senate X President	ment For: 2006 Primary General Other (specify)										
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NAME OF COMMITTEE (In Full) AMERICAN MEDICAL ASSOCIATION PC	LITICAL ACTION COMMIT	ГΤΕ	E									
Full Name (Last, First, Middle Initial)					Transa	ction	ID: S	SB23.1	8019	9		
SILVESTRE REYES CANDIDATE FOR U	S CONGRESS				Date of				/ ° V	V	V	
Mailing Address 505 E RIO GRANDE					0 2	]	<sup>D</sup> 1	7 ' [	2	0 Ď 6		
City EL PASO	State Zip Code TX 79902				Amoun	t of E	ach [	Disburse	-		-	ŀ
Purpose of Disbursement 2006 PRIMARY	Г	0.	11						1	500.0	00	_
Candidate Name SILVESTRE REYES		Cate Ty	gory/ pe									
Senate X	ement For: 2006 Primary General											
State: TX District: 16	Other (specify)											
Full Name (Last, First, Middle Initial)				Η.	Tranca	ction	יחו	SB23.1	8029	Q		_
TED POE FOR CONGRESS				- 1	Date of	Disb	ursei	ment			Y	
Mailing Address PO BOX 14222					0 2	] [	2	7	2	0 Ď 6		
City HUMBLE	State Zip Code TX 77347				Amoun	t of E	ach [	Disburse	-		-	Ŀ
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Candidate Name TED POE		Cate Ty	gory/ pe									
Senate X President	ement For: 2006 Primary General Other (specify)											
State: TX District: 02  Full Name (Last, First, Middle Initial)				+								
TEXANS FOR HENRY BONILLA					Date of	Disb	urser					
Mailing Address PO BOX 17292					0 2	]	2	7 ' [	Ž	0 Ď 6	1	
City SAN ANTONIO	State Zip Code TX 78217				Amoun	t of E	ach [	Disburse	ment	this P	erio	t T
Purpose of Disbursement 2006 PRIMARY		0	11						. 2	0.000	00	_
Candidate Name HENRY BONILLA	(	Cate Ty	gory/ pe									
Senate X President	ement For: 2006 Primary General Other (specify)											
State: TX District: 23												_
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NAME OF	COMMITTEE (In Full) AN MEDICAL ASSOCIATION PO				Jonoit U	Zi iti iDU	10113 110	J.11 JUUI			
•	(Last, First, Middle Initial) FOR HENRY CUELLAR  dress 1519 WASHINGTON S	TREET			Da		Disburse	SB23.1		0 0 ŏ 6	Y
City LAREDO		State Zip Code TX 78042			Ar	nount (	of Each	Disburs	ement	t this P	eriod
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	R CUELLAR ght: X House Disburs	ement For: 2004  Primary General  Other (specify)		уре							
•	(Last, First, Middle Initial) FOR LAMAR SMITH				Da		tion ID:	SB23.1			Y
Mailing Add	dress 5170 BROADWAY				d	″2 <sup>™</sup>	1	Ŏ ′	2	0 0 6	
City SAN ANT		State Zip Code TX 78209			Ar	nount	of Each	Disburs		t this P	-
2006 PRIM Candidate			Cate	11 egory/		•				,000.0	0
Office Sou	· · · ·	ement For: 2006  Primary General  Other (specify)		,,,,,							
_	(Last, First, Middle Initial) DRAKE FOR CONGRESS					ite of D	Disburse				
Mailing Add	dress PO BOX 61480					2	/ D 1	6 /	ž	0 Ď 6	Y
City VIRGINI <i>A</i>		State Zip Code VA 23466			Ar	nount (	of Each	Disburs			
2006 PRIM				11		•			2	2100.0	0
Candidate THELMA	DRAKE	2000		egory/ ype							
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b	
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NAME OF COMMITTEE (In Full)  AMERICAN MEDICAL ASSOCIATION POL	·		Cit Contribut	10115 11011	1 SUCIT COI	THTHILLEE		
Full Name (Last, First, Middle Initial) THORNBERRY FOR CONGRESS  Mailing Address PO BOX 9392			Transaction ID: SB23.18034 Date of Disbursement  O 2 D Y Y Y Y O O 6					
City State Zip Code AMARILLO TX 79105				Amount of Each Disbursement this Period				
Purpose of Disbursement 2006 PRIMARY  Candidate Name  Category/						2000.0	0	
WILLIAM M (MAC) THORNBERRY  Type								
Office Sought:    X   House   Disburser   X     Senate   President     State: TX   District: 13	nent For: 2006 Primary General Other (specify)							
Full Name (Last, First, Middle Initial)  3. VIRGINIA FOXX FOR CONGRESS			Transaction ID: SB23.18001 Date of Disbursement					
Mailing Address PO BOX 1100			02	16	) Y	ž 0 ŏ 6	Y	
CLEMMONS	tate Zip Code NC 27012		Amount o	f Each D	isbursem	ent this P	-	
Purpose of Disbursement 2006 PRIMARY  Candidate Name		011 Category/		•	• •	1000.0	0	
VIRGINIA ANN FOXX		Туре						
Office Sought:  X House Senate President State: NC District: 05	nent For: 2006 Primary General Other (specify)							
Full Name (Last, First, Middle Initial)  VOLUNTEERS FOR SHIMKUS			Transact Date of D	isbursem	nent		_	
Mailing Address PO BOX 5458			0 2 M	0 9		ž 0 ŏ 6	Y	
SPRINGFIELD	tate Zip Code L 62705		Amount o	f Each D	isbursem	ent this P 2000.0		
Purpose of Disbursement 2006 PRIMARY		011				2000.0	O ,	
Candidate Name JOHN M SHIMKUS		Category/ Type						
Office Sought:  X House Senate President State: IL District: 19	nent For: 2006 Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>				5000.0	0	
TOTAL This Period (last page this line number only)		•			14	5600.0	0	